

YVETTE WEINSTEIN
Federal Bankruptcy Trustee
6450 SPRING MOUNTAIN RD.
LAS VEGAS, NV 89146
(702) 364-8919

E-FILED 4/20/10

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

In re:

ESQUIVEL, JOSEPH R, JR.
XXX-XX-6333

ESQUIVEL, LORI
XXX-XX-7754

Debtor(s).

CASE NO. BK-S 09-29326 BAM

IN PROCEEDINGS UNDER CHAPTER 7

**NOTICE OF ASSETS AND NOTICE TO
FILE CLAIMS**

NOTICE IS HEREBY GIVEN, pursuant to Bankruptcy Rule 3002(c)(5), that the Trustee has found assets in this bankruptcy estate from which a payment of a dividend appears possible. Any creditor holding a claim against the above-entitled estate may file a proof of claim in the **Office of the Clerk of the Bankruptcy Court, 300 Las Vegas Boulevard South, Las Vegas, Nevada 89101.**

NOTICE IS FURTHER GIVEN that to be considered for a dividend in accordance with the Rule, a proof of claim must be filed within ninety (90) days after the date of mailing of this notice. The last date to file claims is **July 20, 2010.**

NOTICE IS FURTHER GIVEN that, pursuant to Local Bankruptcy Rule 2002(7), after the expiration of the claims bar date in a Chapter 7 case, all notices required by Fed R. Bank P. 2002(a), except Fed. R. Bank. P. 2002(a)(4), may be mailed only to creditors whose claims have been filed with the Clerk of the Court and to creditors, if any, who are permitted to file claims by reason of an extension granted under Fed. R. Bank. P. 3002(c)(6).

DATED: 4/20/10

/s/ Yvette Weinstein

YVETTE WEINSTEIN, TRUSTEE

**NOTE: CLAIMS ARE TO BE FILED AT THE U.S. BANKRUPTCY COURT,
300 LAS VEGAS BOULEVARD SOUTH, LAS VEGAS, NEVADA 89101
CLAIMS NOT FILED BY THE BAR DATE ARE GENERALLY NOT ALLOWED.**

UNITED STATES BANKRUPTCY COURT-DISTRICT OF NEVADA

PROOF OF CLAIM -CHAPTER 7

Name of Debtor

ESQUIVEL, JOSEPH R, JR.

Case Number

09-29326 BAM

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NOTE: This form should NOT be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. Section 503..

Name of Creditor (The person or other entity to whom the debtor owes money or property)

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☐ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

Name & address where notices should be sent:

Telephone number: ()

Account or other number by which creditor identifies debtor:

Check here if this claim

- ☐ replaces ☐ amends a previously filed claim, dated _____

1. BASIS FOR CLAIM

- ☐ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☐ Other _____

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensation (FILL OUT BELOW)
- Your Social Security # _____ - _____ - _____
- Unpaid compensation for services performed from _____ (date) _____ To _____ (date)

2. Date debt was incurred:**3. If court judgment, date obtained:****4. Total amount of claim at time case filed: \$ _____ (Unsecured)**

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

- ☐ Check this box if claim includes interest, or other charges in addition to the principal amount of the claim. Attach an itemized statement of all interest or additional charges.

5. Secured Claim.

- ☐ Check this box if your claim is secured by collateral (including a right of setoff)

Brief description of collateral:

- ☐ Real Estate ☐ Motor Vehicle

☐ Other _____

Value of collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any:

\$ _____

6. Unsecured Priority Claim.

- ☐ Check this box if you have an unsecured priority claim.

Amount entitled to priority \$ _____

Specify the priority of the claim:

- ☐ Wages, salaries, or commissions up to **\$4,650*** earned within 90 days before filing of the bankruptcy petition, or cessation of the debtor's business, whichever is earlier- 11 U.S.C. § 507(a)(3)
- ☐ Contributions to an employee benefit plan.- 11 U.S.C. § 507(a)(4)
- ☐ Up to **\$2,100*** of deposits toward purchase, lease or rental of property or services for personal, family or household use- 11 U.S.C. § 507(a)(6)
- ☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child- 11 U.S.C. § 507(a)(7)
- ☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8)
- ☐ OTHER-Specify applicable paragraph of 11 U.S.C. § 507(a)(_____).

***Amounts are subject to adjustment on 4/1/98 and every three years thereafter with respect to cases commenced on or after the date of adjustment.**

7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

8. Supporting documents: Attach copies of supporting documents, such as promissory notes purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

9. Date-Stamped copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and a copy of this proof of claim.

Date:

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

(This space for court use)